

Dated: _____

~~Ex~~ In re Patent Application of:
Ze'ev Ronai et al.

Confirmation No.: 1884

Art Unit: 1642

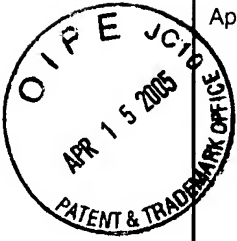
Examiner: Stephen L. Rawlings

Dear Sir:

In response to the Notice of Non-compliant Amendment dated April 6, 2005, in connection with the Amendment filed on March 20, 2005, in response to the Office Action dated December 20, 2004, submitted herewith is a corrected claims listing pursuant to 37 C.F.R. please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.



Application No. (if known): 10/076,905

Attorney Docket No.: 02420/1001249-US2

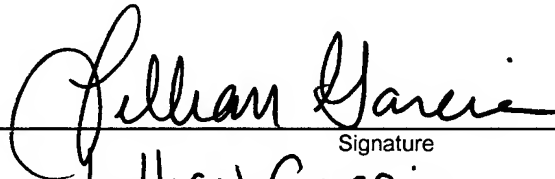
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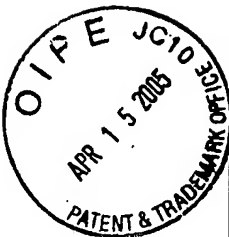

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Lillian Garcia
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Supplemental Amendment in Response to Notice of Non-Compliant
Amendment (8 pages)
Amendment Transmittal (1 page)
Return Receipt Postcard

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AMENDMENT TRANSMITTAL LETTER			Docket No. 02420/100I249-US2		
Application No. 10/076,905	Filing Date February 14, 2002	Examiner Stephen L. Rawlings	Art Unit 1642		
Applicant(s): David E. Burstein					
Invention: INHIBITION OF ATF2 ACTIVITY TO TREAT CANCER					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	7	- 24 =	0	x	
Independent Claims	6	- 6 =	0	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
_____ Stephanie R. Amoroso, Ph.D. Attorney Reg. No.: 51,401			Dated: <u>April 15, 2005</u>		
DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7665					
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